

☒ Initial Application
☐ Amended Application
 Date: 7/26/18



YUMA COUNTY COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

PAC-03

COMMITTEE TYPE (choose one):

☒ **Candidate**

Committee Name (required): _____
 (first or last name & office)

Candidate Information: Candidate's Name (required): _____
 Candidate's mailing address (required): _____
 Candidate's email address (required): _____
 Candidate's phone number (required): _____
 Candidate's website (if any): _____

Office Sought (choose one):

- | | |
|--|--|
| <input type="checkbox"/> Assessor | <input type="checkbox"/> Board of Supervisors – District _____ |
| <input type="checkbox"/> Attorney | <input type="checkbox"/> Constable – Precinct _____ |
| <input type="checkbox"/> Clerk of Superior Court | <input type="checkbox"/> Justice of the Peace – Precinct _____ |
| <input type="checkbox"/> Recorder | <input type="checkbox"/> Superior Court Judge- Division _____ |
| <input type="checkbox"/> School Superintendent | <input type="checkbox"/> Other Office: _____ |
| <input type="checkbox"/> Sheriff | District (if applicable) _____ |
| <input type="checkbox"/> Treasurer | |

Election Cycle for Office Sought (year the election will take place) (required): _____

Party Affiliation: ☐ Democrat ☐ Green ☐ Libertarian ☐ Republican ☐ Other: _____
 (required for partisan offices)

☒ **Political Action Committee (PAC)**

Committee Name (required): Yes For Crane Kids
 (if sponsored, must include sponsor's name)

Political Function (optional): ☒ Contributions ☐ Candidate-Related Independent Expenditures
 (select any that apply) ☒ Ballot Measure Expenditures ☐ Recall Expenditures

Sponsorship Information: Sponsor's name or nickname (required): _____
 (if applicable) Sponsor's mailing address (required): _____
 Sponsor's email address (required): _____
 Sponsor's phone number (if any): _____
 Sponsor's website (if any): _____

Special Status (if applicable) ☐ Separate Segregated Fund of a Corporation, LLC, Partnership, or Union
☐ Standing Committee (must also complete separate standing committee registration)
☐ Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications only)

☒ **Political Party**

Committee Name (required): _____
 (must include party affiliation)

Jurisdiction: ☒ State Party (must include proof of qualification pursuant to A.R.S. § 16-801 or § 16-804)
☒ County Party (must include proof of qualification pursuant to A.R.S. § 16-802 or § 16-804)
☒ Legislative District Party (must include proof of organization pursuant to A.R.S. § 16-823)
☒ City or Town Party (must include proof of qualification pursuant to A.R.S. § 16-802 or § 16-804)

Special Status (if applicable) ☒ Standing Committee (must also complete separate standing committee registration)

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**YUMA COUNTY
COMMITTEE STATEMENT OF
ORGANIZATION**

COMMITTEE ID NUMBER
(office use only)

COMMITTEE INFORMATION:

Contact Information:

Committee's mailing address (required): _____
Committee's email address (required): _____
Committee's phone number (if any): _____
Committee's website (if any): _____

Chairperson's Information: Chairperson's name (required):

Clint Harrington

Chairperson's physical address (required): 3111 S. Horseshoe Bend Ave
Chairperson's mailing address (if different): Yuma, AZ 85364
Chairperson's email address (required): clintc.pilkington@comcast.com
Chairperson's phone number (required): 928-503-1519
Chairperson's employer (required): Pilkington Commercial Co. Inc.
Chairperson's occupation (required): Project Manager

Treasurer's Information: Treasurer's name (required):

Paul Ulan

Treasurer's physical address (required): 5320 N. 16th St, Suite 111
Treasurer's mailing address (if different): Phoenix, AZ 85016
Treasurer's email address (required): pulan@primaryconsultants.com
Treasurer's phone number (required): 602-294-0700
Treasurer's employer (required): SELF
Treasurer's occupation (required): Consultant

Bank or Financial Institution: Bank name (required):

Bank of America

(do not list acct numbers)

Additional bank name (if applicable): _____

Additional bank name (if applicable): _____

DECLARATION AND SIGNATURES:

I declare under penalty of perjury that the foregoing information is true and correct. I further declare that I: (1) consent to serve as chairperson or treasurer of the committee named herein, if applicable; (2) designate the above-named committee as my official candidate committee and authorize it to receive/make contributions/expenditures on my behalf, if applicable; (3) have read the Secretary of State's campaign finance and reporting guide; (4) agree to comply with Arizona election law, including campaign finance laws codified at A.R.S. §§ 16-901 to 16-938; and (5) agree to accept all notifications and legal service of process for campaign finance purposes via the email address(es) provided herein.

Chairperson's signature: _____

Date: _____

7/25/18

Treasurer's signature: _____

Date: _____

7/25/18

Candidate's signature (if applicable): _____

Date: _____

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